

Part I General Information

1 Name of organization

TERI CAREY CAMPAIGN FUND

Employer identification number

applied for

2 Mailing address (P.O. Box or number, street, and room or suite number)

1629 N. E. 3rd St.

City or town, state, and ZIP code

Ocala FL. 34470

3 E-mail address of organization

4a Name of custodian of records

7E81 CAREY

4b Custodian's address

Fr 1629 N.E. 3rd St

Ocala Fl 34470

5a Name of contact person

same as above

5b Contact person's address

6 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number

City or town, state, and ZIP code

Part II	Purpose
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7 Describe the purpose of the organization.

political campaign

Part III **List of All Related Entities** (see instructions)

8a Name of related entity

8b Relationship

8c Address



